

**Statement on Minimum Data Set (MDS) 3.0**  
**Offered for Presentation at the CMS Town Hall Meeting on 6/2/03**

**By**

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Nursing care providers have identified that the multiple uses of the MDS complicate rather than simplify the MDS and the Resident Assessment Instrument (RAI) process. The MDS attempts to meet documentation needs for clinical assessment, quality monitoring and reimbursement. The proposed MDS 3.0 adds to the multifunctional tool by incorporating sections to survey patient satisfaction/quality-of-life and disease prevention activities. The continually growing multi-purpose assessment results in a tool and process that loses clinical value. For example, clinicians completing assessments as defined by standards of professional practice, are challenged when an assessment coding must first give consideration to a reimbursement requirement.

The MDS not only attempts to deliver a one-size-fits-all approach to long term care services, but tries to assess the clinical needs of beneficiaries in the same fashion. There are distinct patient populations receiving care in long term care facilities. These include chronic elderly, chronic adult, short-stay, pediatric and palliative care/end-of-life patients. These patient populations have different clinical, reimbursement, treatment, preventive care, psychosocial and quality-of-life considerations. Even with recent MDS attempts to identify and segregate patient subgroups, the tool remains primarily “all-inclusive” in addressing the needs of these populations.

Articulation of a clear vision for MDS is needed. The American Health Care Association (AHCA) recommends that the Centers for Medicare and Medicaid Services (CMS) convene a panel of experts, MDS users and other stakeholders to work with them in articulating a vision for MDS and in identifying short, medium and long-range goals. Some questions needing to be addressed in articulating a vision include:

- What does the MDS currently accomplish and is this effective?
- What should the MDS do?
- Should future MDS serve several functions and if so, what will be needed to get the job done?

AHCA believes that by convening a panel of experts, stakeholders will have a better understanding of MDS function, have an end point in mind in how the MDS should perform and will be able to determine what short-term and long-steps will be needed to achieve the vision. This approach will help to identify current roadblocks to achieving quality MDS assessments. A vision will also help identify the limitations in current MDS technology and the infrastructure and interfaces that will be needed to achieve desired results.